

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

FORMAL COMPLAINT

Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, Illinois 62701

For Commission Use Only:

Case: 07-0346

ORIGINAL

Regarding a complaint by (Person making the complaint):

CAROL JACOBS - LUGGE

Against (Utility name):

AMEREN IP

As to (Reason for complaint)

Astronomical Usage for One Elderly Person

in FREEBURG

Illinois. 62243-1820

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is

701 JACOBS LANE

The service address that I am complaining about is

701 JACOBS LANE

My home telephone is

(618) 539-3238

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at

" "

(Full name of utility company) AMEREN IP

to the provisions of the Illinois Public Utilities Act.

(respondent) is a public utility and is subject

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

I do NOT know the legal technicalities - I am sure

Ameren is somehow inflating my usage

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

☒ Yes ☐ No

Has your complaint filed with that office been closed?

☐ Yes ☒ No

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

Please See Attached Sheet(s).

Please clearly state what you want the Commission to do in this case: *I want my bills to accurately and honestly reflect my usage of electricity!*

Date: *May 15, 2007*
(Month, day, year)

Complainant's Signature *Carol Jacobs-Lugge*

If an attorney will represent you, please give the attorney's name, address, and telephone number.

You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

VERIFICATION

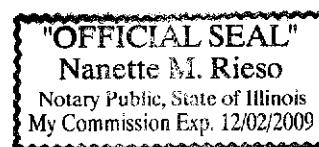
A notary public must witness the completion of this part of the form.

I, *Carol Jacobs-Lugge*, first being duly sworn, say that I have read the above petition and know what it says.
The contents of this petition are true to the best of my knowledge.

(Signature) *Carol Jacobs-Lugge*

Subscribed and sworn/affirmed to before me on (month, day, year) *5/25/07*

Nanette M. Ries
Notary Public, Illinois



NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.